

Indiana Bureau of Developmental Disabilities Services

BDDS POLICY

Provider Reverification for Non-Accredited Waiver Services

Policy Number: 2020-02-R-001

Effective Date: February 9, 2020

Revision History: N/A

<u>Purpose</u>: To clarify that approved providers of home and community based waiver services (HCBS) that do not require accreditation and that do not voluntarily seek accreditation, must meet the specified requirements of the Division of Disability and Rehabilitative Services (DDRS) and Bureau of Developmental Disabilities Services (BDDS) for reverification to continue to offer these non-accredited services to individuals with intellectual and developmental disabilities.

Scope: BDDS Staff, BQIS Staff, Waiver Providers

Policy Statement(s):

- A. For a new provider or a provider adding a service not requiring accreditation:
 - 1. Prior to the expiration of the provider's first year of approval as a BDDS provider, and every two (2) years thereafter, the provider shall be subject to a review of its provider data, including but not limited to the following topics:
 - a. Complaint investigations;
 - b. Incident reports;
 - c. Mortality reviews;
 - d. Any outstanding issues that endanger the health or safety of an individual receiving services from the provider, this would include corrective actions plans and sanctions; and
 - e. Annual satisfaction surveys of individuals receiving services from the provider, including records of findings and documentation of efforts (or planned efforts) to improve service delivery in response to the surveys, according to 460 IAC 6-10-10.
 - 2. If BDDS identifies compliance issues during its review of the provider's data,

BDDS shall issue the provider a notification of citations and/or sanctions that must be addressed prior to being re-verified as a provider of non-accredited services, according to Indiana Code Section 12-11-1.1-11.

- 3. After the provider has addressed all citations and/or sanctions, the provider shall be required to execute a provider agreement with DDRS. The provider must execute the provider agreement to complete the reverification process. Failure to execute the provider agreement shall result in the provider not being reverified.
- B. Every year, a provider of non-accredited services must submit the following to BDDS, or its designee, for review:
 - Confirmation of provider location(s), contact information, and BDDS approved services;
 - 2. Provider's current organizational chart;
 - 3. Indiana Secretary of State documentation;
 - 4. The financial information required by 460 IAC 6-11-2 and 6-11-3;
 - 5. Provider's insurance documentation;
 - 6. A copy of the annual satisfaction survey of individuals receiving services from the provider, including records of findings and documentation of efforts (or planned efforts) to improve service delivery in response to the surveys, according to 460 IAC 6-10-10; and
 - 7. All policies created or updated since its last reverification with substantive revisions.
- C. If the provider fails to meet the requirements for reverification, the provider shall be subject to any citations and/or sanctions BDDS is authorized to issue under Indiana Code 12-11-1.1-11.
- D. The provider must also maintain enrollment through the Office of Medicaid Policy and Planning (OMPP) enrollment process. OMPP provider enrollment is a separate process overseen by OMPP.

Definitions:

"BDDS" means Bureau of Developmental Disabilities Services as created under IC 12-11-1.1-1.

"DDRS" means the Division of Disability and Rehabilitative services as established by IC 12-9-1-1.

"Provider" has the meaning set forth in 460 IAC 6-3-42.

References:

IC 12-9

IC 12-11-1.1

IC 12-28-5

460 IAC 6-6-5

460 IAC 6-7-3

460 IAC 6-10-10

460 IAC 6-11

460 IAC 6-12-2

DDRS Policy: Incident Reporting & Management

DDRS Policy: BQIS Complaints DDRS Policy: Mortality Review

Authorized |

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Date

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